



AMENDMENT TRANSMITTAL LETTER			Docket Number MR2707-46
Application Number 10/668,352	Filing Date 24 September 2003	Examiner P.M. Dharja	Group Art Unit 2629
Invention Title CAPACITIVE TOUCHPAD INTEGRATED WITH KEY AND HANDWRITING FUNCTIONS			

## TO THE COMMISSIONER OF PATENTS AND TRADEMARKS

Transmitted herewith is an amendment in the above - identified application.

- ☐ Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.
- ☐ A verified statement to establish Small Entity status under 37 CFR 1.27 is enclosed.
- ☐ No additional fee is required.
- ☒ The fee has been calculated as shown below:

## CLAIMS AS AMENDED

	(1)		(2)	(3)		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS	* 40	Minus	** 40	0	x 0	0
INDEPENDENT CLAIMS	* 8	Minus	*** 4	4	x 200.00	800.00
MULTIPLE DEPENDENT CLAIM ADDED					\$ 0	0
					<b>TOTAL</b>	<b>\$ 800.00</b>
If applicant is a small entity under 37 CFR 1.9 and 1.27, then divide total fee by 2 and enter amount here					<b>SMALL ENTITY TOTAL</b>	<b>\$400.00</b>

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the highest number previously paid for IN THIS SPACE is less than 20, enter "20".

\*\*\* If the highest number previously paid for IN THIS SPACE is less than 3, enter "3".

The "highest number previously paid for" (total or independent) is the highest number found in the appropriate box in column 1.

- ☐ Please charge Deposit Account Number **18-2011** in the amount of \$ \_\_\_\_\_.

A duplicate copy of this sheet is enclosed.

- ☒ A check in the amount of \$ 400.00 to cover the filing fee is enclosed.

- ☐ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account Number **18-2011**.

A duplicate copy of this sheet is enclosed.

- ☐ Any additional filing fees required under 37 CFR 1.16.
- ☐ Any patent application processing fees under 37 CFR 1.17.

10/11/200  
(Date)

(Signature)  
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